



## DISCLOSURE 3A – INDIVIDUAL: FINANCIAL INFORMATION

Refer to the Application Instruction Booklet for instructions on how to complete this form at: [www.michigan.gov/mmfl](http://www.michigan.gov/mmfl)

Individual's Name

Use related addendum if additional pages are necessary.

### Include the following documents with this disclosure:

- CPA attested financial statement including foreign attested CPA statement or its equivalent, if applicable, documenting the sources and total amount of the individual's contribution, if any, to establishing the capitalization to operate and maintain the proposed marijuana facility, including any pecuniary interest, any deposit of value of the individual, or made directly or indirectly to the applicant entity/applicant individual, or both. A CPA attested financial statement is not needed for supplemental applicants that are not providing sources of capitalization for the applicant entity. Mortgage statements must be provided if mortgaged property is intended to be used as a source of capitalization for the proposed marijuana facility as well as Broker's Price Opinion (BPO), appraisal, or document indicating State Equalized Value (SEV).
- Monthly (checking or regular savings) or quarterly statements (investments) for each listed account for the past **twelve months**. Please submit only one copy of statements for accounts that are jointly held by individuals.

Provide the following information for each bank, credit union, savings and loan association, stock brokerage firm, or other financial institution (foreign or domestic) in which the individual has or has had an account, over the last **twelve-month period**. Provide this information regardless of whether such account was held in the name of the individual, a nominee of the individual or was otherwise under the direct or indirect control of the individual.

|                  |                                   |                        |
|------------------|-----------------------------------|------------------------|
| Institution Name | Date Account Opened and/or Closed | Name(s) on the Account |
| Account Number   | Type of Account                   | Balance                |
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